

Parent/Guardian Survey
(Due Thursday 8/27/2015)
7th Grade Math – Ms. Scheld

Thank you for taking a few minutes out of your busy day to complete this survey. The more information I have, the better we can work together to help your student succeed.

Student Name: _____

Parent/Guardian Name(s): _____

Relationship to student (i.e. parent, grandparent...): _____

How do you prefer to be contacted about your student:

Email

Home Phone

Cell Phone

Contact information: _____

What goals do you have for your student?

What motivates your student?

Is there anything else that I should know that would be helpful in making me the best math teacher for your student?

What other questions, comments, or concerns do you have?